

FY08-Clinical-004	PROGRAM BULLETINS	Effective Date: 12/1/07
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Bulletin Number: FY08–Clinical-004	CLINICAL SERVICES BULLETIN	Effective Date: 12-01-2007
<input type="checkbox"/> New	Subject: Individual Co-Occurring Counseling	Number of Pages: 2

1. Programs Affected

- 1.1 All certified substance abuse treatment programs: CSTAR, Enhanced Primary Recovery Plus and Primary Recovery Plus

2. Individual Co-Occurring Disorder Counseling

- 2.1 Individual Co-Occurring Disorder Counseling shall be provided in accordance with the Center for Substance Abuse Treatment's (CSAT) publication, *Substance Abuse Treatment for Persons with Co-Occurring Disorders* (TIP 42). Additional Department specified protocols may be added later with provider collaboration.
- 2.2 Individual Co-Occurring Disorder Counseling should be delivered within a substance abuse treatment program with a development plan toward increasing fidelity over time to the evidence and consensus based practices described in TIP 42 or other CSAT approved practice for this population.
- 2.3 Individual Co-Occurring Disorder Counseling must be provided in accordance with the client's treatment plan and must address issues related to substance abuse and the co-occurring mental disorder which interfere with the client's functioning. Clinical documentation of this service in progress notes within the client record must clearly distinguish this service from Individual Substance Abuse Counseling.

3. Staff qualifications required for service to be reimbursed

- 3.1 The person must hold a license in a mental health profession and practice within their current competence. We would expect this to be a physician, psychologist, licensed counselor or licensed clinical worker. We are requiring a fully licensed mental health practitioner with current competence and expertise

in co-occurring substance abuse and mental health disorders; therefore, services provided by a provisionally licensed clinician do not qualify for reimbursement.

- 3.2 The certification standard, 9 CSR 10-7.140(QQ), within *Core Rules for Psychiatric and Substance Abuse Programs* does not apply to this service. We are not requiring a “Qualified Mental Health Professional” under this rule. We are requiring the qualifications stated in section 3.1.
- 3.3 The person providing this service must also be a Qualified Substance Abuse Professional as defined in *Core Rules for Psychiatric and Substance Abuse Programs*, 9 CSR 10-7.140 (RR) in addition to the requirement in section 3.1.
- 3.4 The Missouri Substance Abuse Professional Credentialing Board (MSAPCB) is in the process of developing a credential for co-occurring disorder counseling. When approved, this will also be a qualifying credential.

4. Service Limits

- 4.1 Consumers who meet criteria for admission to a Community Psychiatric Rehabilitation Program (CPRP) should be referred to a community mental health center for that service. Please refer to 9 CSR 30-4.042, Admission Criteria, for a description of who should be referred.
- 4.2 For consumers admitted to CPRP, when substance abuse treatment services are not available within the CPRP itself, then the ADA program may work collaboratively with the CPRP to provide the substance abuse treatment services that are necessary and likely to benefit the consumer.
- 4.3 Consumers who present for treatment with a co-occurring substance abuse disorder and a mental disorder, but do not meet the criteria for CPRP, should be treated in an ADA funded program providing integrated substance abuse and mental health services outline in section 2 of this bulletin.
- 4.4 Service providers are required to use existing allocations to fund these services and service package dollar limits are unchanged. This will necessitate that providers, working within current allocations and service limits, provide a different blend of services from the available menu as appropriate for persons with co-occurring mental health and substance abuse disorders.